

**United States Bankruptcy Court
Middle District of Tennessee**

In re Associated Healthcare Systems, Inc.
Debtor

Case No. 07-07219-MH3-11

Chapter 11

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

			AMOUNTS SCHEDULED		
NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	4	13,606,471.38		
C - Property Claimed as Exempt	No	0			
D - Creditors Holding Secured Claims	Yes	1		214,648.05	
E - Creditors Holding Unsecured Priority Claims	Yes	2		1,576.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		27,842,915.18	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	3			
I - Current Income of Individual Debtor(s)	No	0			N/A
J - Current Expenditures of Individual Debtor(s)	No	0			N/A
Total Number of Sheets of ALL Schedules		20			
Total Assets			13,606,471.38		
Total Liabilities				28,059,139.23	

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE A. REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
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None

Sub-Total > 0.00 (Total of this page)

Total > 0.00

0 continuation sheets attached to the Schedule of Real Property

(Report also on Summary of Schedules)

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In re Associated Healthcare Systems, Inc.Case No. 07-07219-MH3-11

Debtor

SCHEDULE B. PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand	X			
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		PrimeTrust Bank P.O. Box 210145 Nashville, TN 37221 Accounts Payable Account	-	33,002.51
		PrimeTrust Bank P.O. Box 210145 Nashville, TN 37221 Depository Account	-	35,410.12
		PrimeTrust Bank P.O. Box 210145 Nashville, TN 37221 Savings Account	-	406.85
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.	X			
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.	X			
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Prepaid Insurance	-	16,339.05
Sub-Total > (Total of this page)				85,158.53

3 continuation sheets attached to the Schedule of Personal Property

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In re Associated Healthcare Systems, Inc.

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Debtor

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.		Investment in Subsidiaries Associated Healthcare Systems of Lexington, LLC	-	0.00
		Investment in Subsidiaries Sabine Medical Center, Inc.	-	6,055,923.00
		Investment in Subsidiaries Associated Healthcare Systems of Randolph County, Inc.	-	0.00
		Investment in Subsidiaries Associated Healthcare Systems of Kentucky Lake, Inc.	-	1,961,156.00
		Investment in Subsidiaries Healthcare of Berrien County, Inc.	-	4,729,047.00
		Investment in Subsidiaries Carroll County Medical Advisors Limited Partnership	-	0.00
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.		Accounts Receivable	-	78,101.21
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			

Sub-Total > 12,824,227.21
(Total of this page)

Sheet 1 of 3 continuation sheets attached
to the Schedule of Personal Property

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE B. PERSONAL PROPERTY

(Continuation Sheet)

Type of Property	NON E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
18. Other liquidated debts owing debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		Various office equipment, furnishings and supplies See attached "Book Asset Detail"	-	697,085.64
29. Machinery, fixtures, equipment, and supplies used in business.	X			

Sub-Total > 697,085.64
(Total of this page)

Sheet 2 of 3 continuation sheets attached
to the Schedule of Personal Property

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In re Associated Healthcare Systems, Inc.

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SCHEDULE B. PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Sub-Total > 0.00
(Total of this page)
Total > 13,606,471.38

Sheet 3 of 3 continuation sheets attached
to the Schedule of Personal Property

(Report also on Summary of Schedules)

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Attachment to Schedule B, #28

Book Asset Detail

FYE: 12/31/2007 Mth: 9/30/2007

Asset *	Property Description	Date In Service	Book Cost	Book Sec 179 Exp	c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: Major Moveable Equipment												
1	Server Equipment	4/14/00	11,463.27	0.00		0.00	11,463.27	0.00	11,463.27	0.00	S/L	5.0
2	Computer Equipment	4/17/00	2,609.98	0.00		0.00	2,609.98	0.00	2,609.98	0.00	S/L	5.0
3	Terminal Server	4/17/00	3,103.59	0.00		0.00	3,103.59	0.00	3,103.59	0.00	S/L	5.0
4	Exchange Server	4/18/00	1,970.03	0.00		0.00	1,970.03	0.00	1,970.03	0.00	S/L	5.0
5	Compaq Proliant	4/19/00	3,799.92	0.00		0.00	3,799.92	0.00	3,799.92	0.00	S/L	5.0
6	Compaq Proliant	4/19/00	3,799.92	0.00		0.00	3,799.92	0.00	3,799.92	0.00	S/L	5.0
7	Compaq Proliant	4/19/00	3,799.92	0.00		0.00	3,799.92	0.00	3,799.92	0.00	S/L	5.0
8	Laptop Computer	7/15/00	2,154.94	0.00		0.00	2,154.94	0.00	2,154.94	0.00	S/L	5.0
9	Compaq Armada M300	9/14/00	2,670.10	0.00		0.00	2,670.10	0.00	2,670.10	0.00	S/L	5.0
10	Compaq Armada M700	9/15/00	3,395.00	0.00		0.00	3,395.00	0.00	3,395.00	0.00	S/L	5.0
11	Compaq Proliant M1350	10/03/00	3,697.88	0.00		0.00	3,697.88	0.00	3,697.88	0.00	S/L	5.0
12	Compaq Deskpro 550	10/03/00	909.30	0.00		0.00	909.30	0.00	909.30	0.00	S/L	5.0
13	Compaq Deskpro 550	10/03/00	909.30	0.00		0.00	909.30	0.00	909.30	0.00	S/L	5.0
14	Compaq Deskpro 550	10/03/00	909.30	0.00		0.00	909.30	0.00	909.30	0.00	S/L	5.0
15	Compaq Equip/Software	10/04/00	5,753.96	0.00		0.00	5,753.96	0.00	5,753.96	0.00	S/L	5.0
16	Computer System	11/08/00	6,224.38	0.00		0.00	6,224.38	0.00	6,224.38	0.00	S/L	5.0
17	Memory Modules	4/14/00	1,210.63	0.00		0.00	1,210.63	0.00	1,210.63	0.00	S/L	5.0
18	Integrated Controller	5/22/00	1,499.40	0.00		0.00	1,499.40	0.00	1,499.40	0.00	S/L	5.0
19	SBS Electrical Upgrade	5/26/00	1,975.50	0.00		0.00	1,975.50	0.00	1,975.50	0.00	S/L	5.0
20	Printer & Monitor	10/02/00	2,772.17	0.00		0.00	2,772.17	0.00	2,772.17	0.00	S/L	5.0
21	512 Mb Modules/SCSI Interface	10/03/00	2,586.42	0.00		0.00	2,586.42	0.00	2,586.42	0.00	S/L	5.0
22	Compaq Proliant/HP Laser	11/07/00	3,560.68	0.00		0.00	3,560.68	0.00	3,560.68	0.00	S/L	5.0
23	Great Plains Software	3/24/00	41,693.42	0.00		0.00	41,693.42	0.00	41,693.42	0.00	S/L	3.0
24	Windows SQL Software	4/17/00	2,880.30	0.00		0.00	2,880.30	0.00	2,880.30	0.00	S/L	3.0
25	Software License Fees	10/04/00	1,515.32	0.00		0.00	1,515.32	0.00	1,515.32	0.00	S/L	3.0
26	Great Plains Software	1/01/01	10,000.00	0.00		0.00	10,000.00	0.00	10,000.00	0.00	S/L	3.0
27	Great Plains Software License	4/20/01	5,345.49	0.00		0.00	5,345.49	0.00	5,345.49	0.00	S/L	3.0
28	IBM Laptop	3/20/01	3,121.41	0.00		0.00	3,121.41	0.00	3,121.41	0.00	S/L	5.0
29	Dell Dimension 4100 W/19 inch Mo	4/01/01	1,720.12	0.00		0.00	1,720.12	0.00	1,720.12	0.00	S/L	5.0
30	Data Center Hardware	1/01/03	6,091.91	0.00		0.00	5,685.75	101.54	5,787.29	304.62	S/L	5.0
31	Compaq EVO P4 Laptop	1/01/03	1,972.11	0.00		0.00	1,840.64	32.87	1,873.51	98.60	S/L	5.0
32	Data Center Hardware	1/01/03	7,770.79	0.00		0.00	7,252.71	129.51	7,382.22	388.57	S/L	5.0
33	Data Center Hardware	1/01/03	4,435.56	0.00		0.00	4,139.87	73.92	4,213.79	221.77	S/L	5.0
34	Compaq EVO P4 Laptop	1/01/03	1,972.11	0.00		0.00	1,840.64	32.87	1,873.51	98.60	S/L	5.0
35	Six (6) Each Compaq 18.2 GB Harc	1/01/03	2,528.14	0.00		0.00	2,359.62	42.13	2,401.75	126.39	S/L	5.0
36	Data Center Hardware	1/11/03	9,912.91	0.00		0.00	9,252.07	165.21	9,417.28	495.63	S/L	5.0
37	Three (3) Each Compaq 36.4 GB Hi	1/11/03	1,204.64	0.00		0.00	1,124.34	20.08	1,144.42	60.22	S/L	5.0
38	Two (2) Each Internet Security App	1/11/03	4,815.18	0.00		0.00	4,494.15	80.25	4,574.40	240.78	S/L	5.0
39	Compaq CTO	1/23/03	2,713.06	0.00		0.00	2,532.20	45.21	2,577.41	135.65	S/L	5.0
40	Two (2) Compaq PC, Monitor	1/23/03	2,359.89	0.00		0.00	2,163.22	39.34	2,202.56	157.33	S/L	5.0
41	Data Center Hardware	1/23/03	7,356.11	0.00		0.00	6,743.07	122.61	6,865.68	490.43	S/L	5.0
42	Six (6) Each Compaq 36 GB Hard I	2/01/03	9,334.98	0.00		0.00	8,557.04	155.58	8,712.62	622.36	S/L	5.0
43	Data Center Hardware	9/09/03	2,297.90	0.00		0.00	1,838.34	38.30	1,876.64	421.26	S/L	5.0
44	13 Each Compaq 36.4 GB Hard Dri	9/29/03	1,605.96	0.00		0.00	1,258.05	26.76	1,284.81	321.15	S/L	5.0
45	Data Center Hardware	10/07/03	10,439.01	0.00		0.00	8,177.18	173.98	8,351.16	2,087.85	S/L	5.0
46	Data Center Hardware	10/12/03	8,570.73	0.00		0.00	6,713.81	142.84	6,856.65	1,714.08	S/L	5.0
47	SysTrack Server (5)	10/18/03	1,668.18	0.00		0.00	1,278.92	27.80	1,306.72	361.46	S/L	5.0
48	SysTrack Terminal Server (2)	1/18/04	4,238.00	0.00		0.00	3,037.20	70.63	3,107.83	1,130.17	S/L	5.0
49		1/18/04	2,390.00	0.00		0.00	1,712.80	39.83	1,752.63	637.37	S/L	5.0

Book Asset Detail

FYE: 12/31/2007 Mth: 9/30/2007

Asset *	Property Description	Date In Service	Book Cost	Book Sec 179 Exp	c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: Major Moveable Equipment (continued)												
50	Toshiba S507 Laptop	2/24/04	1,749.99	0.00		0.00	1,225.04	29.17	1,254.21	495.78	S/L	5.0
51	Toshiba S509 Laptop	3/25/04	2,217.74	0.00		0.00	1,515.43	36.96	1,552.39	665.35	S/L	5.0
52	Toshiba S420 Laptop	3/25/04	1,966.47	0.00		0.00	1,343.69	32.78	1,376.47	590.00	S/L	5.0
53	HP 9010 Laptop	3/26/04	1,608.75	0.00		0.00	1,099.28	26.81	1,126.09	482.66	S/L	5.0
54	IBM Thinkpad Laptop PC	4/09/04	2,138.61	0.00		0.00	1,461.34	35.64	1,496.98	641.63	S/L	5.0
55	Sonicwall Pro 2040 Firewall	5/10/04	1,669.81	0.00		0.00	1,113.20	27.83	1,141.03	528.78	S/L	5.0
56	Data Processing Server	6/01/04	7,974.01	0.00		0.00	5,183.10	132.90	5,316.00	2,658.01	S/L	5.0
57	Data Processing Server	7/08/04	5,994.04	0.00		0.00	3,796.22	99.90	3,896.12	2,097.92	S/L	5.0
58	Data Processing Server	10/28/04	12,506.05	0.00		0.00	7,086.71	208.44	7,295.15	5,210.90	S/L	5.0
59	Cisco Data Router	10/28/04	7,696.98	0.00		0.00	4,361.60	128.28	4,489.88	3,207.10	S/L	5.0
60	Dell Optiplex PC	12/17/04	1,110.64	0.00		0.00	610.85	18.51	629.36	481.28	S/L	5.0
61	Photo ID Machine	1/01/01	1,195.37	0.00		0.00	1,195.37	0.00	1,195.37	0.00	S/L	5.0
62	HP LJ3200 Se Fax Machine	3/10/01	649.49	0.00		0.00	649.49	0.00	649.49	0.00	S/L	5.0
63	HP4500 Color Laser Printer	4/01/01	1,600.00	0.00		0.00	1,600.00	0.00	1,600.00	0.00	S/L	5.0
64	SS3 4900 Switch	1/01/03	8,417.84	0.00		0.00	7,856.66	140.30	7,996.96	420.88	S/L	5.0
65	Proxima Projector	1/01/03	4,088.21	0.00		0.00	3,815.67	68.14	3,883.81	204.40	S/L	5.0
66	Exabyte Mammoth 2 Tape Drive	2/03/03	4,439.52	0.00		0.00	4,143.51	74.00	4,217.51	222.01	S/L	5.0
67	Two (2) Each Storageworks Closures	10/14/03	7,652.58	0.00		0.00	5,994.50	127.54	6,122.04	1,530.54	S/L	5.0
68	Emergency Power Generator	1/01/04	36,541.35	0.00		0.00	8,932.36	203.01	9,135.37	27,405.98	S/L	15.0
69	Proxima Data/Video Projector	3/26/04	3,892.64	0.00		0.00	2,660.01	64.88	2,724.89	1,167.75	S/L	5.0
70	Sonicwall VPN	3/26/04	1,258.40	0.00		0.00	859.87	20.97	880.84	377.56	S/L	5.0
71	Packateer PacketShaper	12/20/04	12,357.88	0.00		0.00	6,796.78	205.96	7,002.74	5,355.14	S/L	5.0
72	Office Furnishings - B of A note #1	7/30/02	37,473.90	0.00		0.00	37,473.90	0.00	37,473.90	0.00	S/L	5.0
73	One Lot - Office Furnishings	4/30/03	3,623.28	0.00		0.00	3,140.21	60.38	3,200.59	422.69	S/L	5.0
74	One Lot - Office Furnishings	5/30/03	5,244.85	0.00		0.00	4,458.07	87.42	4,545.49	699.36	S/L	5.0
75	Office Furniture	12/31/04	18,714.38	0.00		0.00	9,981.05	311.91	10,292.96	8,421.42	S/L	5.0
76	Data Center Software	1/01/03	2,924.83	0.00		0.00	2,924.88	0.00	2,924.88	-0.05	S/L	3.0
77	Citrix MetaFrame Software	1/01/03	1,567.74	0.00		0.00	1,567.76	0.00	1,567.76	-0.02	S/L	3.0
78	Great Plains Software	1/01/03	1,696.28	0.00		0.00	1,696.30	0.00	1,696.30	-0.02	S/L	3.0
79	Anti-Virus Software	1/13/03	3,151.00	0.00		0.00	3,151.00	0.00	3,151.00	0.00	S/L	3.0
80	Data Center Software	2/01/03	2,861.44	0.00		0.00	2,861.44	0.00	2,861.44	0.00	S/L	3.0
81	Data Center Software	10/07/03	3,840.57	0.00		0.00	3,840.57	0.00	3,840.57	0.00	S/L	3.0
82	Server Software Upgrade	3/18/04	4,801.04	0.00		0.00	4,801.04	0.00	4,801.04	0.00	S/L	3.0
83	Citrix Software License	3/25/04	4,426.57	0.00		0.00	4,426.57	0.00	4,426.57	0.00	S/L	3.0
84	Metaframe XPE Software Licenses	7/13/04	17,653.61	0.00		0.00	17,653.61	0.00	17,653.61	0.00	S/L	3.0
85	Microsoft Exchange Software Licor	7/14/04	9,040.22	0.00		0.00	9,040.22	0.00	9,040.22	0.00	S/L	3.0
86	Windows XP PRO Software Licens	7/27/04	3,682.82	0.00		0.00	3,682.82	0.00	3,682.82	0.00	S/L	3.0
87	Telephone Software Upgrade	10/30/04	2,539.80	0.00		0.00	2,398.70	70.55	2,469.25	70.55	S/L	3.0
88	Environment Monitoring Software	12/16/04	3,777.00	0.00		0.00	3,392.32	96.17	3,488.49	288.51	S/L	3.0
89	Systarck Terminal Server license	9/24/04	2,151.00	0.00		0.00	2,091.25	59.75	2,151.00	0.00	S/L	3.0
90	Buildout - Pan Am Electric	2/14/03	1,621.21	0.00		0.00	1,486.10	27.02	1,513.12	108.09	S/L	5.0
91	Buildout - Turnbull Construction	2/14/03	10,720.46	0.00		0.00	9,827.03	178.68	10,005.71	714.75	S/L	5.0
92	Buildout - Turnbull Construction	2/14/03	24,831.80	0.00		0.00	22,762.45	413.86	23,176.31	1,655.49	S/L	5.0
93	Buildout - Pan Am Electric	2/14/03	750.00	0.00		0.00	687.50	12.50	700.00	50.00	S/L	5.0
94	Tosh S209 P4 3.06 15.4 In	2/01/05	3,058.97	0.00		0.00	1,580.43	50.98	1,631.41	1,427.56	S/L	5.0
95	Catalyst 3750 24 10/100/1000T	2/01/05	3,295.34	0.00		0.00	1,702.57	54.92	1,757.49	1,537.85	S/L	5.0
96	Parts-Test System, Amex	2/01/05	1,117.57	0.00		0.00	577.45	18.62	596.07	521.50	S/L	5.0
97	Battery Backed Cache Upgrade-Cor	2/12/05	3,145.16	0.00		0.00	1,625.00	52.42	1,677.42	1,467.74	S/L	5.0
98	HP ML370T04-Corp Server	2/13/05	5,375.37	0.00		0.00	2,777.27	89.59	2,866.86	2,508.51	S/L	5.0

Book Asset Detail

FYE: 12/31/2007 Mth: 9/30/2007

Asset #	Property Description	Date In Service	Book Cost	Book Sec 179 Exp	c	Book Sal Value	Book Prior Depreciation	Book Current Depreciation	Book End Depr	Book Net Book Value	Book Method	Book Period
Group: Major Moveable Equipment (continued)												
99	CISCO1841 WIC IDSU T1 V2-IP 1	2/15/05	1,650.53	0.00		0.00	852.79	27.51	880.30	770.23	S/L	5.0
100	CISCO Router	2/15/05	3,573.15	0.00		0.00	1,846.10	59.55	1,905.65	1,667.50	S/L	5.0
101	Battery Backed Cache Upgrade-Cor	2/15/05	1,557.23	0.00		0.00	804.53	25.96	830.49	726.74	S/L	5.0
102	Smart Array 6402 128MB	4/18/05	1,164.12	0.00		0.00	543.23	19.41	562.64	601.48	S/L	5.0
103	Notebook Comp. Printer	4/21/05	1,680.17	0.00		0.00	784.05	28.00	812.05	868.12	S/L	5.0
104	HP Blade Server System	9/01/05	44,744.50	0.00		0.00	17,897.79	745.74	18,643.53	26,100.97	S/L	5.0
105	Insight-SDL T320 & Clean Cart	11/01/05	3,540.41	0.00		0.00	1,298.15	59.01	1,357.16	2,183.25	S/L	5.0
106	Orion Network Performance Monit	4/27/05	6,629.56	0.00		0.00	5,156.28	184.16	5,340.44	1,289.12	S/L	3.0
107	Creative Solutions Depreciation Sol	8/15/05	1,917.34	0.00		0.00	1,331.48	53.26	1,384.74	532.60	S/L	3.0
108	Insight-Spamkiller MSEXCH SMB	10/01/05	2,268.47	0.00		0.00	1,449.30	63.01	1,512.31	756.16	S/L	3.0
109	Xerox Phaser Color Printer	6/21/05	1,818.13	0.00		0.00	787.85	30.30	818.15	999.98	S/L	5.0
110	Buildout-Held Properties	1/26/05	16,494.00	0.00		0.00	8,521.90	274.90	8,796.80	7,697.20	S/L	5.0
111	Desktop PC	2/01/06	1,664.59	0.00		0.00	527.12	27.74	554.86	1,109.73	S/L	5.0
112	Tape Backup Hardware	2/01/06	3,546.19	0.00		0.00	1,122.96	59.10	1,182.06	2,364.13	S/L	5.0
113	Toshiba Tera Laptop PC	2/01/06	1,050.28	0.00		0.00	332.59	17.50	350.09	700.19	S/L	5.0
114	Web Development Software	2/01/06	2,049.44	0.00		0.00	1,081.65	56.93	1,138.58	910.86	S/L	3.0
115	Office Buildout	3/01/06	5,585.23	0.00		0.00	1,675.57	93.09	1,768.66	3,816.57	S/L	5.0
116	Health Financial Systems-Mdicare C	6/01/06	3,450.00	0.00		0.00	1,437.50	95.83	1,533.33	1,916.67	S/L	3.0
117	Microsoft Office Licensing Softwar	8/01/06	868,450.47	0.00		0.00	313,607.11	24,123.63	337,730.74	530,719.73	S/L	3.0
118	Ironmail S-25 Secure Bundle	8/01/06	29,492.58	0.00		0.00	6,390.07	491.54	6,881.61	22,610.97	S/L	5.0
119	Sony Laptop PC	11/01/06	1,170.66	0.00		0.00	195.11	19.51	214.62	956.04	S/L	5.0
120	MacBook Notebook PC	11/01/06	1,637.66	0.00		0.00	272.94	27.30	300.24	1,337.42	S/L	5.0
121	HP Laserjet 4250N	11/01/06	1,330.65	0.00		0.00	221.78	22.18	243.96	1,086.69	S/L	5.0
122	HP File Server	12/01/06	1,933.69	0.00		0.00	290.06	32.23	322.29	1,611.40	S/L	5.0
Major Moveable Equipment			1,550,940.45	0.00	c	0.00	822,389.37	31,465.44	853,854.81	697,085.64		
Grand Total			1,550,940.45	0.00	c	0.00	822,389.37	31,465.44	853,854.81	697,085.64		

In re Associated Healthcare Systems, Inc.Case No. 07-07219-MH3-11

Debtor

SCHEDULE D. CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. §112; Fed.R.Bankr.P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	H U S B A N D W I F E J O I N T C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D, N A T U R E O F L I E N, A N D D E S C R I P T I O N A N D V A L U E O F P R O P E R T Y S U B J E C T T O L I E N	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M W I T H O U T D E D U C T I N G V A L U E O F C O L L A T E R A L	U N S E C U R E D P O R T I O N, I F A N Y
Account No.			8/1/2007					
Farris Mathews Branan Bobango Hellen & Dunlap PLC 1100 Ridgeway Loop Rd., #400 Memphis, TN 38120-4058		-	Promissory Note Secured by equity interests in the following: Associated Healthcare Systems of Kentucky Lake, Inc. (Common stock); Berrien County Medical Advisors, L.P. (limited partnership units) and Sabine Medical Center, Inc. (common)				214,648.05	99,538.32
Account No.			Value \$					
Account No.			Value \$					
Account No.			Value \$					

0 continuation sheets attached

Subtotal
(Total of this page)

214,648.05

Total

214,648.05

(Report on Summary of Schedules)

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community". If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

☐ **Domestic support obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507 (a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

☐ **Deposits by individuals**

Claims of individuals up to \$2,225* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☒ **Taxes and certain other debts owed to governmental units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C § 507(a)(8).

☐ **Commitments to maintain the capital of an insured depository institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for death or personal injury while debtor was intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

*Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE E. CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Taxes and Certain Other Debts
Owed to Governmental Units

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY
Account No. 614 City of Brentwood 5211 Maryland Way Brentwood, TN 37027		-		Personal Property Taxes				281.00	281.00
Account No. Williamson County Trustee 1320 W. Main Street Suite 203 Franklin, TN 37065		-		Personal Property Taxes				1,295.00	1,295.00
Account No.									
Account No.									
Account No.									
Account No.									

Sheet 1 of 1 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

Subtotal
(Total of this page)

1,576.00 1,576.00

Total

1,576.00 1,576.00

(Report on Summary of Schedules)

In re Associated Healthcare Systems, Inc.Case No. 07-07219-MH3-11

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. §112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 3M Health Information Systems 575 West Murray Blvd. Salt Lake City, UT 84123-4611		-				18,901.56
Account No. AHS Samaritan Hospital, LLC c/o Brian D. Roark; Michael Dagley 315 Deaderick Street, Suite 2700 Nashville, TN 37238	X	-	X		X	310,828.61
Account No. AHS, Inc. f/k/a Angel Healthcare c/o Daniel Giannotti 3322 West End Avenue, Suite 720 Nashville, TN 37203	X	-	X	X	X	57,000.00
Account No. Allegro 2830 National City Tower Louisville, KY 40202	X	-				64,914.28
Subtotal (Total of this page)						451,644.45

7 continuation sheets attached

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No.						
American International Recovery P.O. Box 105795 Atlanta, GA 30348-9864		-				2,884.54
Account No.						
Bank of America P.O. Box 660576 Dallas, TX 75267	X	-				41,698.93
Account No.						
Boston Scientific P.O. Box 951653 Dallas, TX 75395-1653		-	X	X	X	53,617.16
Account No.						
Carrollton Utilities c/o G. Edward James 516 Highland Avenue; P.O. Box 373 Carrollton, KY 41008	X	-	X	X	X	30,000.00
Account No.						
Citadel Outsource Group, LLC 162 Imperial Blvd. Hendersonville, TN 37075		-				26,985.07
Sheet no. <u>1</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						
Subtotal (Total of this page)						155,185.70

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	Husband, Wife, Joint, or Community		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C						
Account No.	X	-	Suit by employees of Carroll County Medical Advisors Limited Partnership		X	X	X	295,000.00
Debra G. Abbott, et al. c/o G. Edward James 516 Highland Ave., P.O. Box 373 Carrollton, KY 41008								
Account No.		-	Microsoft licensing agreement financing					691,248.23
Delange Landen Financial Service P.O. Box 848411 Dallas, TX 75284-8411								
Account No.		-	Promissory Note - Legal fees					99,538.32
Farris Mathews Branan Bobango 1100 Ridgeway Loop Road Suite 400 Memphis, TN 38120								
Account No.	X	-	Suit on guaranty; subsidiary is Associated Healthcare Systems of Lexington LLC			X		421,386.27
First State Financial, Inc. c/o Shon Leverett 204 East Market Street Louisville, KY 40202								
Account No.		-	Legal fees					7,505.88
Frilot Partridge, L.C. 1100 Poydras Street Suite 3600 New Orleans, LA 70163								
Sheet no. <u>2</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					Subtotal (Total of this page)			1,514,678.70

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No.	X	-	Deficiencies on Equipment Leases contracted by Associated Healthcare Systems of Lexington LLC		X		285,184.54
GESF Structured Finance, Inc. c/o David G. Mangum 2303 Franklin Road Nashville, TN 37204							
Account No.		-	Legal fees				3,888.23
Gess Mattingly & Atchison, P.S. 201 West Short Street Lexington, KY 40507							
Account No.	X	-	Office lease for Associated Healthcare of Lexington LLC		X		132,165.38
HDC Holdings, LLC c/o Charlotte H. Turner 250 West Main St., Ste. 2300 Lexington, KY 40507-1758							
Account No.		-	Marketing agreement				19,125.00
Health Infotechnics 210 Jamestown Park Road Suite 101 Brentwood, TN 37027							
Account No.		-	Data processing services				11,800.00
HMS 3102 West End Avenue Suite 400 Nashville, TN 37203							
Sheet no. <u>3</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							452,163.15

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Hospital & Healthcare Compensation P.O. Box 376 Oakland, NJ 07436	-	Advisory services				10.26
Account No. L&J Associates, LLC 7280 Oakmont Court Ponte Vedra Beach, FL 32082	X -	Purchaser of note executed by Berrien County Medical Advisors LP				4,140,000.00
Account No. Larry Scott c/o Barry Kuhn 5100 Stage Road, Suite 4 Memphis, TN 38134	-	Settlement agreement				77,913.00
Account No. Marquette Equipment Finance c/o Joseph E. Wrona 1816 Prospector Avenue, Suite 100 Park City, UT 84060	X -	Suit on guaranty by Debtor of obligations of Associated Healthcare Systems of Lexington LLC, under lease of computer hardware and software		X	X	608,059.40
Account No. National Radiology Group of AR PLLC c/o Nathan E. Ross 500 N. Broadway, Ste. 2000 Saint Louis, MO 63102-2147	X -	Promissory Note with corporate guaranty. Primary obligor is Associated Healthcare Systems of Randolph County, Inc.				112,663.92
Sheet no. <u>4</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) 4,938,646.58

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Norton Hospitals, Inc. c/o Andrew J. Pulliam 2525 West End Ave., Ste. 1500 Nashville, TN 37203	X	-	Action to domesticate an Agreed Judgment entered in the Circuit Court of Jefferson County, KY				1,213,414.23
Account No. PrimeTrust Bank #1 P.O. Box 210145 Nashville, TN 37221	X	-	Rural development guaranteed loan to Associated Healthcare Systems of Kentucky Lake, Inc.				3,417,758.12
Account No. PrimeTrust Bank #2 P.O. Box 210145 Nashville, TN 37221	X	-	Working capital loans to Associated Healthcare Systems of Kentucky Lake, Inc.				3,372,639.18
Account No. Property Valuation Services 12980 Foster Street Suite 370 Overland Park, KS 66213	-		Appraisal services				11,079.26
Account No. Randolph Emergency Group, LLC c/o Robert S. Patterson P.O. Box 340025 Nashville, TN 37203	X	-	Suit on guaranty by Debtor of contract between Plaintiff and Associated Healthcare Systems of Randolph County, Inc.				426,073.43
Sheet no. <u>5</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							8,440,964.22

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B T O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. Republic Bank c/o Stephen C. Tingey P.O. Box 45385 Salt Lake City, UT 84145-0385	X	-	Suit for breach of lease of computer hardware and software entered into between Applied Financial, LLC and Associated Healthcare of Lexington, LLC and guaranteed by Debtor		X	X	1,808,272.80
Account No. Restoration Healthcare Celina LLC c/o Reuben N. Pelot, IV 900 S. Gay St, Ste. 1100 Knoxville, TN 37902	X	-	Obligation pursuant to sale of Cumberland River Medical Advisors LP				287,347.51
Account No. Shared Imaging, Inc. c/o David J. Bressler 4200 Commerce Court, Suite 300 Lisle, IL 60532	X	-	Suit to hold Debtor liable for the obligation of its subsidiary, Trinity Hospital, LLC, on "piercing the corporate veil" theory; lease of MRI machine	X	X	X	337,900.00
Account No. Smith & Nephew Capital c/o William P. Kelly 5201 Eden Ave., Ste. 180 Minneapolis, MN 55436	X	-	Guarantor of Lease Agreement to Associated Healthcare Systems of Lexington LLC	X	X		202,554.00
Account No. Sprint P.O. Box 219623 Kansas City, MO 64121-9623		-	Data line to subsidiaries				57,707.93
Sheet no. <u>6</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							2,693,782.24

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE F. CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E D E B T O R	H U S B A N D , W I F E , J O I N T , O R C O M M U N I T Y	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No.			Suit on note				1,000,000.00
St. Claude Medical Center LLC c/o James Cobb; John Emmett 1515 Poydras Street, Suite 1950 New Orleans, LA 70112	X	-			X	X	
Account No.			Consulting				4,288.03
Stanford Group Company 5050 Westheimer Houston, TX 77056		-					
Account No.			Rural development loan to Sabine Medical Center, Inc.; guaranteed by Debtor				7,211,788.62
Union Bank 1110 Shirley Road Bunkie, LA 71322	X	-					
Account No.			Suit on guaranty by Debtor of computer equipment and software leased by Associated Healthcare of Lexington, LLC				978,473.91
Winthrop Resources Corp. c/o Matthew R. McBride, Esq. 225 South 6th Street, Suite 3500 Minneapolis, MN 55402	X	-			X	X	
Account No.			Legal fees				1,299.58
Wright Lindsey & Jennings, LLP 200 West Capitol Avenue Little Rock, AR 72201		-					
Sheet no. <u>7</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims							Subtotal (Total of this page)
							9,195,850.14
(Report on Summary of Schedules)							Total 27,842,915.18

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE G. EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
Centennial, Inc. 3310 West End Avenue Suite 420 Nashville, TN 37203	Office Space Lease located at 214 Overlook Court, Suite 260 in Brentwood, TN, beginning 7/01, expiring 9/30/09
Dex Imaging 5225 Harding Place Nashville, TN 37217	Copier lease entered 8/03, expires 8/08
Dex Imaging 308 11th Street Carrollton, KY 41008	Copier lease entered 11/04, expires 2/10
Joe & Blair Diaz P.O. Box 366 Gainesville, GA 30503	Office Space located at 616 Green Street, Suite C, Gainesville, GA from 12/03, expiring 12/07

0 continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

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In re Associated Healthcare Systems, Inc.Case No. 07-07219-MH3-11

Debtor

SCHEDULE H. CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

☐ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
A. Ronald Turner	L&J Associates, LLC 7280 Oakmont Court Ponte Vedra Beach, FL 32082
A. Ronald Turner	St. Claude Medical Center LLC c/o James Cobb; John Emmett 1515 Poydras Street, Suite 1950 New Orleans, LA 70112
A. Ronald Turner	Bank of America P.O. Box 660576 Dallas, TX 75267
A. Ronald Turner	Union Bank 1110 Shirley Road Bunkie, LA 71322
AHS Samaritan Hospital, LLC	AHS, Inc. f/k/a Angel Healthcare c/o Daniel Giannotti 3322 West End Avenue, Suite 720 Nashville, TN 37203
Associated Healthcare Systems Management	AHS, Inc. f/k/a Angel Healthcare c/o Daniel Giannotti 3322 West End Avenue, Suite 720 Nashville, TN 37203
Associated Healthcare Systems of Lexington LLC	GESF Structured Finance, Inc. c/o David G. Mangum 2303 Franklin Road Nashville, TN 37204
Associated Healthcare Systems of Randolph County, Inc.	Randolph Emergency Group, LLC c/o Robert S. Patterson P.O. Box 340025 Nashville, TN 37203
Associated Healthcare Systems of Lexington LLC	Marquette Equipment Finance c/o Joseph E. Wrona 1816 Prospector Avenue, Suite 100 Park City, UT 84060
Associated Healthcare Systems of Lexington LLC	Republic Bank c/o Stephen C. Tingey P.O. Box 45385 Salt Lake City, UT 84145-0385

2 continuation sheets attached to Schedule of Codebtors

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In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE H. CODEBTORS

(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Associated Healthcare Systems of Lexington LLC	Winthrop Resources Corp. c/o Matthew R. McBride, Esq. 225 South 6th Street, Suite 3500 Minneapolis, MN 55402
Associated Healthcare Systems of Lexington LLC	AHS, Inc. f/k/a Angel Healthcare c/o Daniel Giannotti 3322 West End Avenue, Suite 720 Nashville, TN 37203
Associated Healthcare Systems of Lexington LLC	HDC Holdings, LLC c/o Charlotte H. Turner 250 West Main St., Ste. 2300 Lexington, KY 40507-1758
Associated Healthcare Systems of Kentucky Lake, Inc.	PrimeTrust Bank #1 P.O. Box 210145 Nashville, TN 37221
Associated Healthcare Systems of Randolph County, Inc.	National Radiology Group of AR PLLC c/o Nathan E. Ross 500 N. Broadway, Ste. 2000 Saint Louis, MO 63102-2147
Associated Healthcare Systems of Lexington LLC	Smith & Nephew Capital c/o William P. Kelly 5201 Eden Ave., Ste. 180 Minneapolis, MN 55436
Associated Healthcare Systems of New Orleans, Inc.	Allegro 2830 National City Tower Louisville, KY 40202
Associated Healthcare Systems of Lexington LLC	First State Financial, Inc. c/o Shon Leverett 204 East Market Street Louisville, KY 40202
Associated Healthcare Systems of Kentucky Lake, Inc.	PrimeTrust Bank #2 P.O. Box 210145 Nashville, TN 37221
Berrien County Medical Advisors LP	L&J Associates, LLC 7280 Oakmont Court Ponte Vedra Beach, FL 32082
Carroll County Medical Advisors Limited Partnership	Norton Hospitals, Inc. c/o Andrew J. Pulliam 2525 West End Ave., Ste. 1500 Nashville, TN 37203

In re Associated Healthcare Systems, Inc.

Case No. 07-07219-MH3-11

Debtor

SCHEDULE H. CODEBTORS

(Continuation Sheet)

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Carroll County Medical Advisors Limited Partnership	Carrollton Utilities c/o G. Edward James 516 Highland Avenue; P.O. Box 373 Carrollton, KY 41008
Carroll County Medical Advisors Limited Partnership	Debra G. Abbott, et al. c/o G. Edward James 516 Highland Ave., P.O. Box 373 Carrollton, KY 41008
Cumberland River Medical Advisors LP	Restoration Healthcare Celina LLC c/o Reuben N. Pelot, IV 900 S. Gay St, Ste. 1100 Knoxville, TN 37902
Integrated Health Plus, LLC	First State Financial, Inc. c/o Shon Leverett 204 East Market Street Louisville, KY 40202
Jae H. Hill	St. Claude Medical Center LLC c/o James Cobb; John Emmett 1515 Poydras Street, Suite 1950 New Orleans, LA 70112
James L. Marshall, Jr.	St. Claude Medical Center LLC c/o James Cobb; John Emmett 1515 Poydras Street, Suite 1950 New Orleans, LA 70112
Sabine Medical Center, Inc.	Union Bank 1110 Shirley Road Bunkie, LA 71322
Samaritan Alliance LLC	AHS Samaritan Hospital, LLC c/o Brian D. Roark; Michael Dagley 315 Deaderick Street, Suite 2700 Nashville, TN 37238
Trinity Hospital, LLC	Shared Imaging, Inc. c/o David J. Bressler 4200 Commerce Court, Suite 300 Lisle, IL 60532

**United States Bankruptcy Court
Middle District of Tennessee**

In re Associated Healthcare Systems, Inc.

Debtor(s)

Case No. 07-07219-MH3-11

Chapter 11

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the President and CEO of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 21 sheets [*total shown on summary page plus 1*], and that they are true and correct to the best of my knowledge, information, and belief.

Date October 18, 2007

Signature /s/ A. Ronald Turner

A. Ronald Turner
President and CEO

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.